



# NORTH ISLAND Snowdrifters OF SAN DIEGO, CA

2022-2023 Membership Application Form [www.nisnowdrifter.com](http://www.nisnowdrifter.com)

First & Last Name (Nickname)		Sex	Birthdate	Season Pass?	<b>Place * next to information not to publish in the Membership Directory.</b>
Home Phone	Cell Phone	E-mail Address		<b>**Member Dues: \$50</b>	
Mailing Address			City	State	Zip Code
Emergency Contact Name & Relationship (Parent, Child, Spouse, etc.)			Emergency Contact Phone	How did you hear about us?	

Select items of interest that you would be inclined to participate in. Enter  in activity box.

<b>Volunteer</b> Board <input type="checkbox"/> Committee <input type="checkbox"/> Trip Leader <input type="checkbox"/> Condo Captain <input type="checkbox"/> General Helper <input type="checkbox"/>	<b>Leisure</b> Travel <input type="checkbox"/> Dining <input type="checkbox"/> Theater <input type="checkbox"/> Movies <input type="checkbox"/> Cooking <input type="checkbox"/> Wine Tasting <input type="checkbox"/> Spa Outings <input type="checkbox"/> Table Games <input type="checkbox"/>	<b>Active Sports</b> Down Hill Ski <input type="checkbox"/> Cross Country Ski <input type="checkbox"/> Snowboard <input type="checkbox"/> Cycling <input type="checkbox"/> Hiking <input type="checkbox"/> Camping <input type="checkbox"/> Walking <input type="checkbox"/> Dancing <input type="checkbox"/>	<b>Ball Sports</b> Golf <input type="checkbox"/> Tennis <input type="checkbox"/> Softball <input type="checkbox"/> Volleyball <input type="checkbox"/> Racquetball <input type="checkbox"/> Pickleball <input type="checkbox"/> Bowling <input type="checkbox"/> Pool <input type="checkbox"/>	<b>Water Sports</b> Water Ski <input type="checkbox"/> Rafting <input type="checkbox"/> Kayaking <input type="checkbox"/> Fishing <input type="checkbox"/> Snorkeling <input type="checkbox"/> Scuba <input type="checkbox"/> Surfing <input type="checkbox"/> Boating <input type="checkbox"/>
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**WAIVER AND RELEASE OF LIABILITY READ BEFORE SIGNING:** In consideration of being allowed to participate in any way in the North Island Snowdrifters' programs, related events and activities, I ( [redacted] ), the Undersigned, acknowledge, appreciate, & agree that: **1.** The risk of injury from the many of the activities is significant, including the potential for permanent paralysis & death, & while particular skills, rules, equipment, & personal discipline may reduce this risk, the risk of serious injury does exist; and, **2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others & assume full responsibility for my participation; and, **3.** I willingly agree to comply with the stated & customary terms & conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation & bring such to the attention of the nearest official immediately; and, **4.** I, for myself & on behalf of my heirs, assigns, personal representatives & next of kin, **HEREBY RELEASE AND HOLD HARMLESS** the North Island Snowdrifters, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, & if applicable, owners and lessors of premises used to conduct the event ("**RELEASEES**"), **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE,** to the fullest extent permitted by law. **I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, & SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Participant Signature [redacted] Date: [redacted]

**FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)** This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent & agree to his/her release as provided above of all the Releases, & for myself, my heirs, assigns, & next of kin, I release & agree to indemnify and hold harmless the RELEASEES from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES,** to the fullest extent permitted by law. I also consent to allow medical treatment in the event of an emergency.

(Parent/Guardian) [redacted] Date [redacted]

**\*\* Make checks payable to NIS & mail to: MJ Lau, 2396 Harcourt Drive, San Diego CA 92123**